

3p/2814

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|--|--------------------------------------|-------------------------------|--------------------------------|---------|-------------------|
| AMENDMENT TRANSMITTAL LETTER (Large Entity) | | | Docket No. SEC.626 | | |
| Applicant(s): Seung-dong Kang et al. | | | | | |
| Serial No. 09/275,808 | Filing Date March 25, 1999 | Examiner G. Peralta | Group Art Unit 2814 | | |
| Invention: METHOD OF FABRICATING A CAPACITOR | | | | | |
| TO THE ASSISTANT COMMISSIONER FOR PATENTS: | | | | | |
| Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below. | | | | | |
| CLAIMS AS AMENDED | | | | | |
| | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST # PREV. PAID FOR | NUMBER EXTRA CLAIMS PRESENT | RATE | ADDITIONAL FEE |
| TOTAL CLAIMS | 17 - | 20 = | 0 x | \$18.00 | \$0.00 |
| INDEP. CLAIMS | 3 - | 3 = | 0 x | \$78.00 | \$0.00 |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/> | | | | | \$0.00 |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT | | | | | \$0.00 |
| <div style="display: flex; justify-content: space-between;"><div><input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ A duplicate copy of this sheet is enclosed. <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0238 A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</div><div style="text-align: right; vertical-align: bottom;"><div style="border: 1px solid black; padding: 5px; transform: rotate(-90deg); transform-origin: center;">TO COMM. MAIL ROOM FEB-3 1999 RECEIVED</div><div>Dated: DEC. 7, 1999</div></div></div> <div style="margin-top: 20px;"><div style="display: flex; align-items: center;"><div style="text-align: center;"> _____ <i>Signature</i></div><div style="margin-left: 20px;">RAYMOND C. JONES REG. NO. 34,631 JONES VOLENTINE, LLP 12200 SUNRISE VALLEY DRIVE, SUITE 150 RESTON, VA 20191 TEL. NO. (703) 715-0870</div></div></div> <div style="border: 1px solid black; padding: 5px; margin-top: 20px;"><div>I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.</div><div style="border-top: 1px solid black; height: 40px; margin-top: 10px;"></div><div style="border-top: 1px solid black; margin-top: 10px;"><i>Signature of Person Mailing Correspondence</i></div><div style="border-top: 1px solid black; margin-top: 10px;"><i>Typed or Printed Name of Person Mailing Correspondence</i></div></div> <div style="margin-top: 20px;">CC: _____</div> | | | | | |